ATTORNEY DOCKET NO. Combined Declaration For Patent Application and Power of Attorney 81715/LPK As below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHOD FOR CORRECTION OF THE CALIBRATION OF A REGISTER MARK ACCURATE PRINTING PROCESS The specification of which (check only one item below): is attached hereto. was filed as United States Application Serial No. ____ was amended on (if applicable). was filed as PCT international application Number on and was amended under PCT Article 19 on (if applicable). I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed: PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119: APPLICATION NUMBER PRIORITY CLAIMED LINDER 35 LISC \$119 COUNTRY (If PCT, indicate PCT) Germany 103 04 763.8 **February 5, 2003** NO I hereby claim the benefit under Title 35, United States Code, 119 §(e) of any United States provisional application(s) listed below: PRIOR PROVISIONAL APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119 (e): I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application: PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S FOR BENEFIT UNDER 35USC§120: U.S. APPLICATIONS STATUS (Check one) U.S. APPLICATION NUMBER U.S. FILING DATE PATENTED PENDING ABANDONED PCT APPLICATIONS DESIGNATING THE U.S. U.S. SERIAL NUMBERS PCT APPLICATION NO. PCT FILING DATE ASSIGNED (if any)

Combined Declaration For Patent Application and P wer of Att rney (Continued) ATTORNEY DOCKET NO. 81715/LPK POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (List name and registration number) Lawrence P. Kessler - Registration No. 24,637 Send Corr sp ndenc t: Direct Teleph ne Calls t: (name and telephone number) Lawrence P. Kessler, Patent Department NexPress Solutions LLC Lawrence P. Kessler 1447 St. Paul Street Tel. No.: (585) 253-0123 Rochester, NY 14653-7103 (U.S.A.) Fax No.: (585) 726-0894 SECOND GIVEN NAME FAMILY NAME FIRST GIVEN NAME FULL NAME OF Boness Dirk Jan CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 0 Germany Bad Bramstedt Germany 24576 BUSINESS ADDRESS CITY STATE & ZIP CODE (COUNTRY) NexPress GmbH, Dr.-Hell-Strasse Kiel Germany 24107 FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF 2 Dreher Klaus Michael Ingo STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 0 Kiel Germany 24103 Germany **BUSINESS ADDRESS** STATE & ZIP CODE (COUNTRY) BUSINESS ADDRESS 2 NexPress GmbH, Dr.-Hell-Strasse Kiel Germany 24107 FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF 2 Hunold Heiko STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & CITIZENSHIP 0 Wattenbek Germany 24582 Germany **BUSINESS ADDRESS** STATE & ZIP CODE (COUNTRY) BUSINESS 3 NexPress GmbH, Dr.-Hell-Strasse Kiel Germany 24107 FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF 2 Schrader Stefan STATE OR FOREIGN COUNTRY RESIDENCE & CITY COUNTRY OF CITIZENSHIP 0 Germany
STATE & ZIP CODE (COUNTRY) Kiel Germany 24118 **BUSINESS ADDRESS** CITY NexPress GmbH, Dr.-Hell-Strasse Kiel Germany 24107 FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF 2 CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & 0 **BUSINESS ADDRESS** STATE & ZIP CODE (COUNTRY) BUSINESS FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF 2 CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & CITIZENSHIP 0 BUSINESS ADDRESS STATE & ZIP CODE (COUNTRY) 6 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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